

Opioid Fatality Review Committee Veterans Report 2020



Unintentional overdose is the second most common injury death among Utah veterans and active military.¹



Males accounted for 95% of Utah veteran and active military accidental or undetermined deaths between 2016 and 2019.¹



Twelve percent of decedents were recently released from institutions such as hospitals, jails/prisons, and supervised residential facilities.²



Nearly half (46%) of decedents were receiving mental illness treatment at the time of their death.²



Toxicology results showed 65% of decedents tested positive for opioids; the majority of which contributed to their death (99%).²

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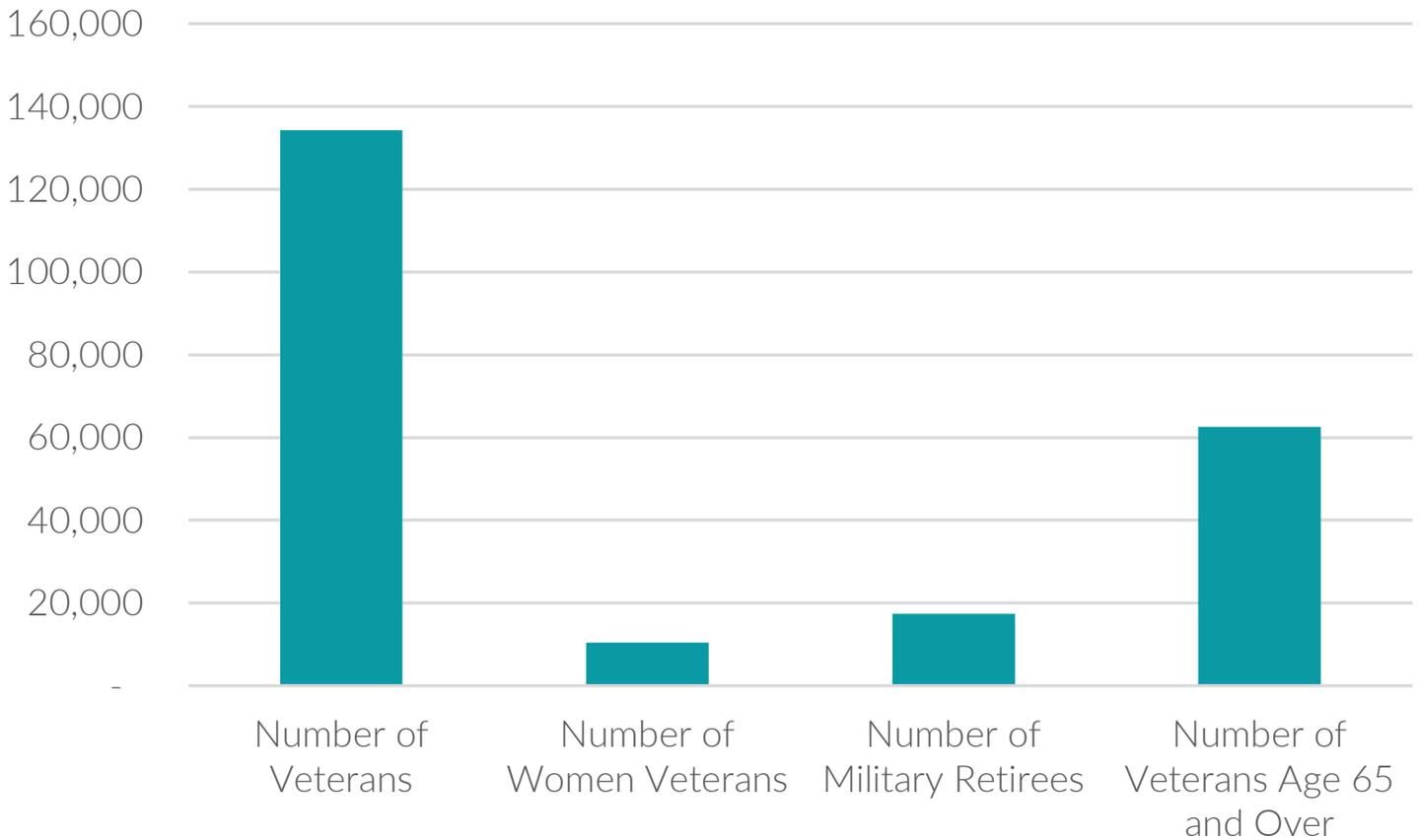
Introduction

A major priority of the Utah Opioid Overdose Fatality Review Committee (OFRC) is to identify groups at higher risk for opioid overdose in order to tailor prevention recommendations to the unique traits and needs of that group. Those who are veterans or are active in the military are disproportionately affected by opioid overdose.

Veterans and Active Military Personnel in Utah

There were more than 134,000 veterans in Utah in 2017. Veterans make up nearly 7% of Utah's population. Among Utah veterans, 92% are male, 13% are military retirees, and 47% are 65 years of age or older.³

Figure 1:
Utah Veteran Population, September 30, 2017



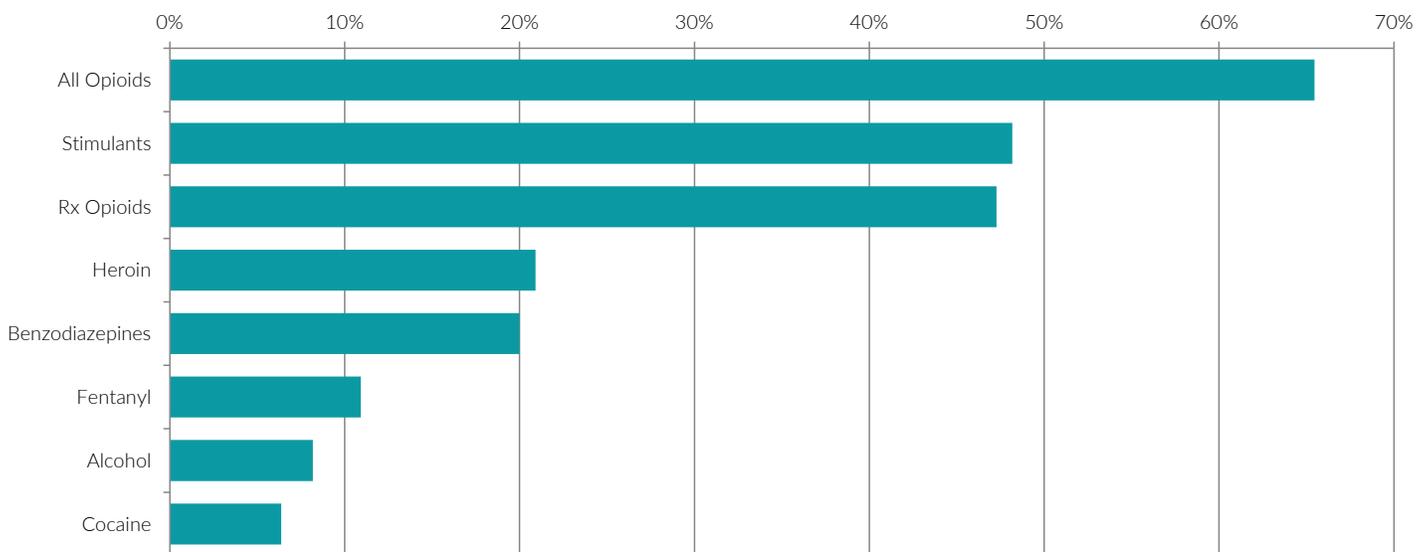
Overdose Deaths among Utah Veterans and Active Military

Between 2016 and 2019, a total of 131 veterans or active military personnel died as a result of drug overdose.¹

- Eighty-eight percent of deaths were unintentional, while 12% were of undetermined intent.¹
- Toxicology data shows 65.5% of veterans/active military personnel died of opioid overdose, 48.2% died of stimulant overdose, 47.3% died of prescription opioid overdose, and 20.9% died of heroin overdose¹ (**Figure 2**). Please note more than one drug may be listed as a cause of death, meaning the percentages will not add up to 100%.
- Nearly 36% of deaths were among those who were unemployed, and 17% were retired.¹ (**Table 1**)
- More than 42% of decedents were divorced or separated at the time of their death.¹ (**Table 1**)
- Forty-six percent of decedents were receiving some form of mental illness treatment at the time of their death² (**Figure 3**).
- A total of 60 decedents had some mental health diagnosis; 52 of which had multiple diagnoses.²

Figure 2:

Cause of Substance Related Deaths Among Utah Veterans and Active Military, 2016-2019



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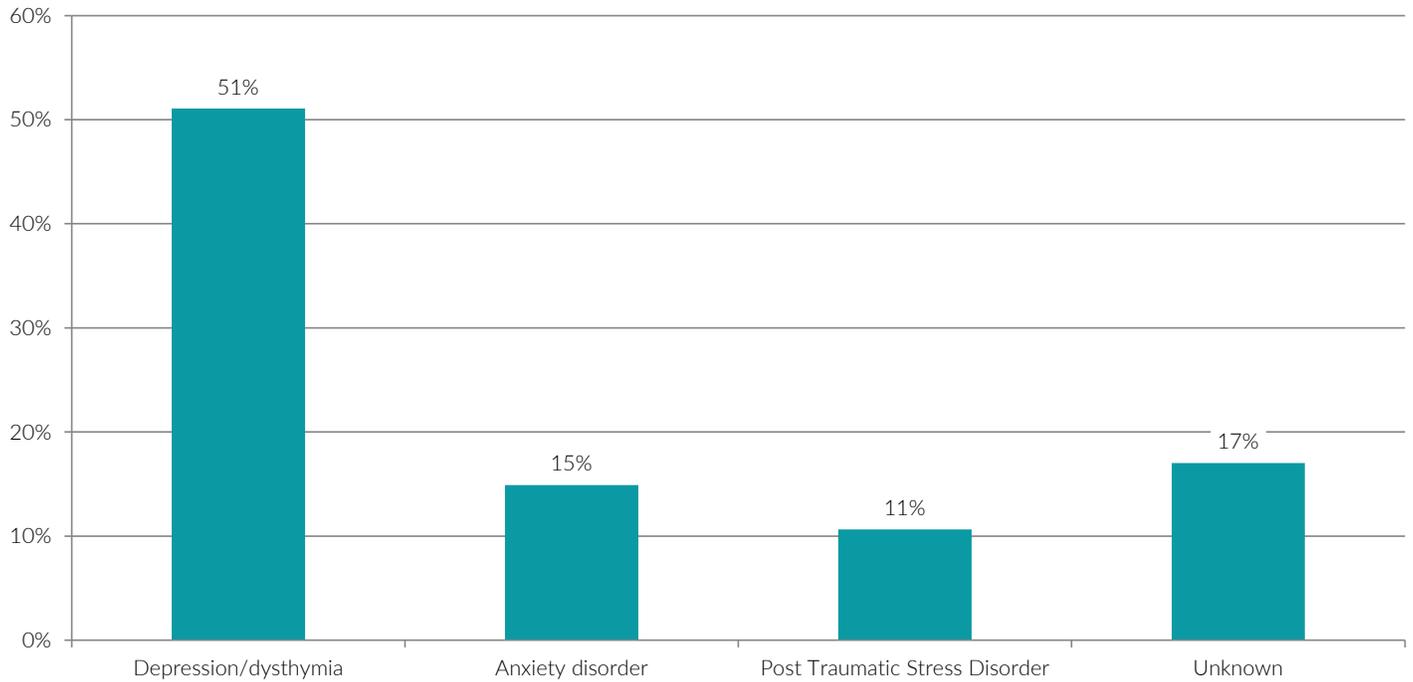
**Table 1:
Opioid-Related Deaths Among Utah Veterans and Active Military, 2016-2019***

	N	%
Sex		
Female	6	4.8%
Male	120	95.2%
Age Group		
18-34	22	17.5%
35-54	45	35.7%
55+	60	47.6%
Race/Ethnicity		
White/Caucasian	119	94.4%
Other	10	7.9%
Hispanic or Latino	7	5.6%
Education		
9th through 12th	8	6.3%
High School or GED	51	40.5%
Some College	37	29.4%
College Degree	26	20.6%
Marital Status		
Married	37	29.4%
Divorced or Separated	51	40.5%
Never Married	29	23.0%
Widowed	7	5.6%
Employment		
Employed	17	13.5%
Unemployed	41	32.5%
Retired	20	15.9%
Homeless		
Yes	9	7.1%
No	114	90.5%
Unknown	2	1.6%
Geographical Location		
Urban	95	75.4%
Rural/Frontier	25	19.8%
Utah Residential Status		
Resident	120	95.2%
Non-Resident	6	4.8%

*Figures may equal more or less than 100% due to inclusion of overlapping variables or disclosure of categories such as "other".

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**Figure 3:
Mental Health Diagnosis among Utah Veterans/Active Military, 2016-2019**



Life stressors may exacerbate mental health challenges and increase suicidal ideation.

**Table 2:
Life Stressors Among Utah Veterans and Active Military, 2016-2019**

Stressor	Percent
Alcohol Problem	28.3%
Crisis with Physical Health	15.4%
Depressed Mood	5.5%
Intimate Partner Problem	4.3%
Recent Argument	3.3%

Opioid Overdose Fatality Review Committee

In response to the growing opioid epidemic, the Utah Department of Health Violence and Injury Prevention Program established the Opioid Overdose Fatality Review Committee (OFRC). The primary purpose of the OFRC is to establish effective strategies to prevent and respond to opioid overdose. The committee is made up of representatives from many agencies such as the Utah Office of the Medical Examiner, Utah Department of Corrections, Attorney General's Office, Utah Division of Occupational and Professional Licensing, Utah Department of Human Services, University of Utah Medical Center, Syringe Exchange Services, and Utah Poison Control Center. The OFRC meets regularly to review opioid overdose deaths and make recommendations to prevent future deaths.

Recommendations

Based on selected fatality reviews of Utah veterans and active military, the OFRC makes the following recommendations:

Advocacy

- Establish peer-to-peer support groups for veterans in treatment with special attention given to those who need assistance with follow-up treatment and care.
- Reduce or eliminate legal fees and fines associated with conviction for veterans who participate in treatment programs.
- Establish a process for support resources to be provided to families in need by the Utah Division of Child and Family Services when substance use is suspected during a child abuse or neglect investigation involving a veteran with known or suspected substance use disorder.

Access to Treatment

- Provide access to continued care for veterans who wish to have their spouses present during in-patient treatment.
- Provide childcare and family services to veterans while in inpatient treatment.

Harm Reduction

- Improve access to grief and loss resources and support systems for family members of veterans who died following a fatal overdose.

Healthcare

- Develop and implement programs to encourage and improve physical and behavioral integration for veterans with substance use disorders.
- Increase and expand emergency service efforts to provide information and education to veterans and their families with substance use disorder following calls for assistance.
- Establish protocols to assess military medical records for triggering events in order to provide prevention services. Post-Traumatic Stress Disorder and addictive behaviors can lead to substance use disorder in veterans.

Public Awareness

- Increase awareness of SafeUT and 211 Substance Use Disorder services to support veterans seeking resources.

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Current and Future Efforts

The George E. Wahlen Department of Veterans Affairs Medical Center offers many services including detoxification, standard and intensive outpatient treatment, as well as residential 24-hour treatment. Many behavioral health centers offer programs tailored to those who are veterans or active military.

Resources

Veterans and Military Affairs in Utah: <https://veterans.utah.gov/healthcare/>

George E. Wahlen Department of Veterans Affairs Medical Center: <https://www.saltlakecity.va.gov/>

VA Facilities in Utah: https://www.va.gov/directory/guide/fac_list_by_state.cfm?State=UT&dnum=All

United Way 2-1-1 Substance Use Disorder Helpline: <https://www.unitedway.org/our-impact/featured-programs/2-1-1>

References

1. Utah Death Certificate Database, Office of Vital Records and Statistics, Utah Department of Health
2. State Unintentional Drug Overdose Reporting System (SUDORS), Utah Violent Death Reporting System
3. National Center for Veterans Analysis and Statistics, 2018